

This Form is for INTERNAL PTO USE ONLY  
It does NOT get mailed to the applicant.

**NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)**

APPLICATION NUMBER: \_\_\_\_\_

**Total Fee Calculation**

<u>Fee Code</u>	<u>Total # Claims</u>	<u>Number Extra</u>	<u>X</u>	<u>Fee</u>	<u>Fee</u>	<u>Total</u>
Basic Filing Fee	<u>201/101</u>				<u>760-</u>	<u>760-</u>
Total Claims >20	<u>203/103</u>	<u>40</u>	<u>-20 =</u>	<u>20</u>	<u>x</u>	<u>18-</u>
Independent Claims >3	<u>202/102</u>	<u>11</u>	<u>-3 =</u>	<u>8</u>	<u>x</u>	<u>78-</u>
Mult. Dep. Claim Present	<u>204/104</u>					
Surcharge	<u>205/105</u>				<u>130-</u>	<u>130-</u>
English Translation	<u>109</u>					
<b><u>TOTAL FEE CALCULATION</u></b>						<u>1874-</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 1874-

Less Filing Fees Submitted = \$ —

BALANCE DUE = \$ 1874-

Figure 7